

TRAVEL EXPENSE CLAIM

See Instructions and *Privacy

ELECTRONIC STD. 262 (REV. 04/95)

Statement On Reverse Side

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CLAIMANT'S NAME Matthew R. Bettenhausen		SSAN OR EMPLOYEE NUMBER*		DEPARTMENT California Emergency Management Agency	
POSITION Acting Secretary		CB/D NUMBER E99		DIVISION OR BUREAU Executive	
RESIDENCE*		HEADQUARTERS ADDRESS 3650 Schriever Ave.		INDEX NUMBER TELEPHONE NUMBER 916-324-8908	

CITY Sacramento	STATE CA	ZIP CODE 95833	CITY Mather	STATE CA	ZIP CODE 95655
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(1) MONTH/YEAR November 2009		(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSE FOR DAY	
(2) DATE	TIME			BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CAREFARE TOLLS, PARKING	(D) PRIVATE CAR USE			
											MILES			AMOUNT
5-Nov	14:30	Sacramento to Burbank	\$ 121.10			\$ 18.00			SC A RC	\$ 23.00			\$ 162.10	
6-Nov	10:20	Burbank to Sacramento		\$ 6.00					RC A SC	\$ 9.00			\$ 15.00	
15-Nov	18:30	Sacramento to Monterey	\$ 95.12						SC			\$ 9.95	\$ 105.07	
16-Nov		Monterey	\$ 95.12	\$ 6.00	\$ 10.00	\$ 18.00	\$ 6.00		SC	\$ 20.00		\$ 9.95	\$ 165.07	
17-Nov		Monterey	\$ 95.12	\$ 6.00	\$ 10.00	\$ 18.00	\$ 6.00		SC	\$ 10.00			\$ 145.12	
18-Nov		Monterey to Ontario		\$ 6.00	\$ 10.00	\$ 18.00	\$ 6.00		A RC				\$ 40.00	
19-Nov	22:30	Ontario to Alameda to Sac		\$ 6.00	\$ 10.00	\$ 18.00	\$ 6.00	\$ 17.99	RC A SC	\$ 37.00			\$ 94.99	
23-Nov	16:00	Sacramento to San Francisco	\$ 149.10			\$ 18.00			SC	\$ 26.30			\$ 193.40 167.10	
24-Nov	15:00	San Francisco to Sacramento		\$ 6.00	\$ 10.00				SC	26.30			\$ 16.00 42.30	
(10) SUBTOTALS			\$ 555.56	\$ 36.00	\$ 50.00	\$ 108.00	\$ 24.00	\$ 17.99		\$ 125.30		\$ 19.90	\$ 936.75	
COLUMN CODE (ACCTG. USE ONLY)														

CLAIM TOTAL

\$ 936.75

11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attached receipts/voucher when required)

11/5: Attend and speak at President of the CPCA -Chief Melekian's Retirement event.

11/9: Business expense charge for Internet access to access work related documents.

11/15-17: Attend NGA HSAC Winter Meeting

11/18: Attend ERTAC meeting.

11/19: Speak at California Fire Fighter Joint Apprenticeship Committee CFFJAC 10th Biennial Conference

11/19: Speak at Alameda Fire Commissioner's meeting; 11/23: Fourth Annual Law Enforcement event; 11/24: Narcotics conference

15) I HEREBY CERTIFY that the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California.

I certify that I have not used, and if mileage rates exceed the minimum rate, I certify the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Section 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt usage.

CLAIMANT'S SIGNATURE

DATE

17) SIGNATURE

INITIALS (See item 17 on reverse)

DATE

DATE

(12) NORMAL WORK HOURS

9:00 - 6:00

(13) PRIVATE VEHICLE LICENSE NUMBER

(14) MILEAGE RATE CLAIMED

48.5¢/Mile

AGENCY ACCOUNTING OFFICE

USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER